

**FDCH Sponsors**  
**Application/Agreement Information for FY 2009**  
**Information Contained in**  
**Permanent File**  
**Approved FY 2008**

The following documents will be approved by State Agency staff and contained in the Permanent File established for each Family Day Care Home Sponsor. These documents are also considered a part of your FDCH Application/Agreement.

- 1) IRS 501(c)(3) letter
- 2) Articles of Incorporation
- 3) Letter to the Chairman of the Board
- 4) Board Certification Statement
- 5) Agency Policy that Restricts Outside Employment
- 6) Employee Job Descriptions
- 7) Personnel Policies
- 8) Disallowance Policy
- 9) Termination Policy
- 10) Accounting Procedures
- 11) Provider Policy Handbook
- 12) Tiering Procedures
- 13) Sample Sponsor/Provider Agreement
- 14) Directions to Sponsor Office

The only two items considered actually “permanent” in each sponsor’s permanent file are the following: 1) IRS 501(c)(3) letter; and 2) Articles of Incorporation. It is possible, however, that a sponsoring organization’s Articles of Incorporation could be revised.

**The length of your contract is officially October 1, 2007 through September 30, 2010.** The State Agency will require all sponsors to submit a **full** Application/Agreement with all attachments for **FY 2011**.

The State Agency has opted to exercise this discretion provided to us in the regulations. **Your Agreement is valid for three years** as long as you remain in compliance.

## Application

#6 Type Sponsor. Check the appropriate box only. **Your IRS 501(c)(3) letters are on file.**

#7 Dates of operation: 10/01/2008 through 09/30/2009

#11 Staffing Pattern: Include all staff that are part of your program.

#12 Disallowance Policy: **Approved FY 2008. In sponsor permanent file at State Agency office.**

**Budget** – Be sure an amount is claimed in each line item you will be claiming throughout the year.

**Certification Statement** – Update to include all board members

## Management Plan

**All questions that have the word “submitted” in the blank must be accompanied by the following additional statement: Approved FY 2008. In sponsor permanent file at State Agency office.**

- 4) Give a description of Sponsor’s accounting system, etc. **Approved FY 2008. In sponsor permanent file at State Agency office.**
- 5) Submit a copy of Sponsor’s policies and procedures for financial management. **Approved FY 2008. In sponsor permanent file at State Agency office.**
- 19) Give Sponsor’s procedure for handling civil rights complaints alleging discrimination in the meal service. **Approved FY 2008. In sponsor permanent file at State Agency office.**
- 20) Give in detail or submit a copy of Sponsor’s meal disallowance policy. **Approved FY 2008. In sponsor permanent file at State Agency office.**
- 21) Submit a copy of Sponsor’s corrective action policies and procedures; include how corrective action plans are developed, evaluated, and how Sponsor tracks action. Include Termination Policy. **Approved FY 2008. In sponsor permanent file at State Agency office.**
- 27) Description of Sponsor’s system for tracking provider eligibility, etc. **Approved FY 2008. In sponsor permanent file at State Agency office.**
- 28) Outline Sponsor’s system for informing Tier II Providers of their options for reimbursement, etc. **Approved FY 2008. In sponsor permanent file at State Agency office.**
- 29) Give Sponsor’s timeframe for making tiering determinations, etc. **Approved FY 2008. In sponsor permanent file at State Agency office.**
- 30) Give Sponsor’s procedures for distributing and collecting household income eligibility statements from families of children enrolled for care in Tier II homes. **Approved FY 2008. In sponsor permanent file at State Agency office.**
- 31) Describe the Sponsor’s procedures for following up on incomplete or incorrect household income eligibility statements, etc. **Approved FY 2008. In sponsor permanent file at State Agency office.**

32) Describe the verification procedures to be used for those day care providers (located in a Tier II area) classified as Tier I based on provider's income. **Approved FY 2008. In sponsor permanent file at State Agency office.**

**#34 Racial Ethnic Makeup of Area – Must be updated.**

**#37 Update appropriate taxes with the 2nd quarter dates.**

#### **Site Sheets**

All site sheets need to be complete and accurate by the application due date.

#1 Site sheet address must match the Sponsor office form and the license/certificate/letter.

#2 Make sure the times match the meal times served. (ex. A provider can't close at 6 pm and have a late night snack at 7:30 pm.)

#5 The total number cared for is total of all children claimed by the provider per day.

#7a This is the total number of children claimed by the provider for the day. (This is the maximum amount to be claimed for each meal per day. 10 children can't be claimed for a meal on the Menus if a provider is only approved for 6 here.)

#7b This is the total of all children claimed.

#7c This is the provider's own children. (These children can't be claimed if the provider is not income eligible).

#7d This is only for related children over capacity. If licensed the capacity is 12. If certified, the provider can claim up to 10 if they are income eligible.

#12 School data is always checked. The name of the school and percentage is always listed.

Income application is checked if the provider is determined Tier I by this method as well as when the provider is claiming her own children or related children over capacity.

Census Tract is checked if the provider is determined Tier I by this method.